ANNUAL PERFORMANCE REPORT MISSOURI PART C



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Department of Elementary and Secondary Education Division of Special Education

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Part C State Annual Performance Report (APR) for 2006-07

Introduction to the Annual Performance Report:

This Annual Performance Report covers the Federal Fiscal Year of 2006 which is the state fiscal year 2007 covering July 2006 through June 2007. The time period covered by this report is referred to as "2006-07" to eliminate confusion due to the differing state and federal fiscal year terminology.

Missouri's early intervention program, First Steps, is operated through contractual agreements in ten (10) regions across the state, an interagency agreement with the Department of Mental Health (DMH) and a central finance office (CFO). The ten regional offices are known as System Points of Entry (SPOE) and they provide service coordination, evaluation and eligibility determinations, as well as all local administrative activities for the program. The Department of Elementary and Secondary Education (DESE) is the lead state agency for the program.

State fiscal year 2007 (July 2006 – June 2007) was the first full year of operation under this configuration of ten regional offices. The state contracts with a single entity in each region to fulfill the SPOE function. Independent providers enroll with the CFO and that network provides direct services to children and families as directed by the Individualized Family Service Plan (IFSP). Approximately 40% of the families in First Steps receive their service coordination through the DMH regional center system. The remaining 60% of service coordination is provided by the SPOE. Prior to February 2006, the Missouri system operated with twenty-four (24) SPOE regions. The data in this Annual Performance Report (APR) reflects performance within each of the current ten regions, including DMH regional centers; however, some information related to the correction of non-compliance from previous monitoring may reflect the state's former regional structure. This report will address these variances in detail as they are presented under the appropriate indicator(s).

Overview of the Annual Performance Report Development:

This APR was developed with review and input from the State Interagency Coordinating Council (SICC) and the regional early intervention programs. The initial discussions regarding data for this report occurred during statewide meetings held on September 13 and 14, 2007. On November 8 and 9, 2007, the regional contractors and the SICC reviewed a preliminary draft of the report including analysis of the data being presented. These groups were asked to provide feedback to the state office so that recommendations could be considered and incorporated into the final document prior to the scheduled review of the final draft at the January 10 and 11, 2008 statewide meetings. At the January meeting the SICC approved the report and accepted it as their annual report.

Public Dissemination and Reporting: Missouri's APR is available for public viewing on the DESE website at http://www.dese.mo.gov/divspeced/FirstSteps/data.html under the link "SPP/APR Data by SPOE – Public Reporting." Copies are provided to each regional SPOE office and the SICC.

In addition to the annual reporting of the APR, DESE reports annually to the regional early intervention offices and the SICC on progress/slippage made across the state during the previous year on meeting the state's targets as addressed in the State Performance Plan (SPP). During these discussions each indicator is examined and evaluated related to the improvement activities described in the SPP. Data is tracked and reviewed periodically during the year to identify current trends that may require immediate technical assistance to individual regions within the state.

The SICC certifies this APR report as their annual report to the Governor and the Secretary of the U.S. Department of Education.

Evaluation of SPP Improvement Activities: The Division of Special Education is working with the North Central Regional Resource Center (NCRRC) to develop a plan for evaluating the implementation and impact of all SPP Improvement Activities. The RRC has trained Division staff in a

model for evaluating improvement activities. Using this model, division staff are presently looking at all current improvement activities and determining if they are "actionable" and "aligned" with the SPP Indicator. After submission of the 2006-07 APR, staff will be doing further analysis of all improvement activities and working with RRC staff to develop an evaluation plan to be put in place for 2007-08.

Regional Technical Assistance: From 2004 to 2007 First Steps contracted with Missouri Child Care Resources and Referral Network for four individuals to provide technical assistance and training in each SPOE region. This contract ended on June 30, 2007 and was not re-bid. DESE determined that this function would be more appropriately handled by employed staff and hired five area directors to work as a program unit within the field. Four of the five individuals employed served under the prior contract as an area consultant. Each area director provides direction, training and problem solving for two contiguous SPOE regions. They also function as the statewide technical assistance unit for the program which enables the lead agency to provide a consistent message to the early intervention community.

Part C State Annual Performance Report (APR) for 2006-07

Monitoring Priority: Early Intervention Services In Natural Environments

Indicator 1: Percent of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner.

(20 U.S.C. 1416(a)(3)(A) and 1442)

Measurement:

Percent = [(# of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner) divided by the (total # of infants and toddlers with IFSPs)] times 100.

Account for untimely receipt of services.

FFY	Measurable and Rigorous Target
2006-07	100% of infants and toddlers with IFSPs will receive the early intervention services on their IFSPs in a timely manner

Actual Target Data for 2006-07:

At 81.5%, Missouri did not meet the 100% target for this indicator, but did show significant progress from the previous year.

Children Receiving Timely IFSP Services

	2005-06	2006-07
Children Receiving All IFSP Services within 30 Days or with Acceptable Reasons for Delay in Initiation of Services*	1,391	2,416
Total Children Receiving IFSP Services*	2,016	2,964
% of Children Receiving All IFSP Services within 30 Days*	69.0%	81.5%

^{*} Both the children receiving all services within 30 days (numerator) and the total children receiving IFSP services (denominator) include children whose delays in initiation of services were due to exceptional family circumstances. See explanation below for more information.

"Children Receiving All IFSP Services within 30 Days" is determined by comparing the first date of service for each service type to the date of parental consent for the service. The date of parental consent is assumed to be equivalent to the IFSP meeting date. If one or more services on the child's IFSP were started more than 30 days after the meeting date or if the child received a 'No Provider Available' (NPA) authorization that was not then provided within the 30 days, the child is not counted as receiving all IFSP services within 30 days. In order to use a single, consistent database, children were only included if they were referred to the program after July 1, 2005. Services considered were those with first date of service between July 1, 2006, and June 30, 2007.

In order to understand this analysis procedure, it is important to note that in Missouri's data system, a service is listed as an "authorization." In the system, the IFSP addresses the services that will be provided to the child and family as an open authorization for the designated provider to use when billing the state system for the services provided. When we discuss a "No Provider Available" authorization, it means that the service listed on the IFSP does not have a designated provider assigned to implement the

service. In some cases these authorizations are changes to a specific provider within 30 days of the IFSP development and in others the NPA authorization continues on the IFSP for a greater time period. Providers are paid to travel significant distances to provide services; however, there are times when providers are not available within the immediate region to implement the necessary service.

A change for 2006-07 included the collection of reasons for the delays in implementation of services for a sample of children. Reasons were gathered for approximately 60% of the children who had delayed implementation of services. Statewide results showed that approximately 46% of the delays were due to acceptable child/family reasons and another 14% were due to acceptable IFSP team decisions to delay the implementation of an individual service. The total number of children with delayed implementation of services was then adjusted using the percentage of acceptable reasons. The acceptable reasons have been included in the numerator and denominator of the calculation for this indicator.

DESE examined the data to account for the children who did not receive all services within 30 days and did not have acceptable reasons for the delay, focusing on two main areas: the impact of provider availability and the services/regions with the largest numbers of untimely services.

The SPOE regions most affected by NPA authorizations included the Southeast region with 19.5% of their untimely implementation due to provider availability; the East Central Region with 16.5%; the Northeast region with 16.3%; and the Northwest region with 11.3%. Each of these regions represents significantly rural areas of the state. NPA authorizations were far less common in the remaining six regions of the state.

2,964 children were included in this analysis and excluding NPA authorizations, represented a total of 5,164 first services authorizations delivered during 2006-07. These data were analyzed by service type. The analysis showed that the four most prevalent services (Speech Language Pathology, Special Instruction, Occupational Therapy and Physical Therapy) were relatively close in overall timeliness; however, some low-incidence services such as Nutrition Services and Audiology Services were less timely in implementation.

Timely "first services" by SPOE ranged from 91.1% (South Central) and 91.0% (Greater St. Louis) to 72.0% (East Central) and 74.6% (Southwest). The latter two SPOEs are largely rural, while the first two are more urban, thus demonstrating provider shortages are more prevalent in rural areas of the state.

Actual delays in initiation of services ranged from one day to ten months. Two-thirds of the delays were 20 days or less. The information above describes the types and localities of the delays. The longest delays were due to scheduling difficulties where either the family could not be contacted despite ongoing efforts to do so or there were significant scheduling issues between providers and families.

Discussion of Improvement Activities Completed <u>and</u> Explanation of Progress or Slippage that occurred for 2006-07:

Data reported in this APR shows significant improvement over the data reported in the APR submitted on February 1, 2007. While the state is not at the target of 100% compliance, an improvement of over 12% is reported. The most significant factor for this improvement was the development of a methodology to obtain the information needed to determine if delays were due to acceptable reasons. Prior to 2006-07 data regarding initiation of first services was not collected in a manner that would allow the state to determine if exceptional circumstances existed that resulted in a delay to the start of a service of greater then 30 days after the parent provided consent for the service.

Improvement activities for the 2006-07 year included the following:

- Ensure consistency of usage/entry of authorizations data for valid data
- Conduct regular data reviews to evaluate service coordinator contacts with families in SPOEs/Regional Centers that have delayed Service provision. Determine if the reason for delay is a service coordination or provider issue. Specifically look at services with highest percents of delays. Implement strategies/sanctions for correction of delay based on the information found. If/when non-compliance is identified, deploy consultants to assist in developing and implementing corrective actions.

 Analyze impact of transportation reimbursement, employment of providers and RICC/SPOE provider recruitment activities in order to track trends and target provider recruitment after new contract structure in place

Develop and implement Transdisciplinary Service Training for service coordinators and providers

Discussion of these improvement activities follows:

Data Consistency: In order to have more accurate data for APR reporting, DESE improved the data system to include a required reporting field that indicates the reason for any delay in the initiation of a first service. This enhancement is operational as of July 1, 2007, and will provide even more accurate reporting of data in the APR due on February 1, 2009. For this APR report, DESE sampled each SPOE region for all twelve months of the fiscal year and manually recorded reasons for untimely services. Reasons related to parent requested delay and/or team decision were considered acceptable and all others were rated as unacceptable.

Data reviews: During the reporting period for this APR, the contracted consultants reviewed and edited all training materials to ensure that the importance of timely initiation of services was adequately addressed and that providers entering the First Steps system understood how the program defined timely services. In addition, quarterly data reviews were conducted by the lead agency to determine needed technical assistance activities by specific region(s) of the state. This technical assistance was designed to assist the local program in analyzing their data and to determine the focus of their improvement activities. These reviews looked at data associated with each indicator and identified areas with the potential for concern. A Key Indicators Report is provided at least quarterly to each SPOE office which addresses the current status for each indicator and is used by the SPOE office to report to their staff on the progress being made related to each indicator.

During 2006-2007, the lead agency staff hosted a statewide meeting of the SPOE directors every other month to discuss operational issues within the program. These full day meetings included general discussion regarding procedures for improving each region's performance with the SPP indicators, meeting the state targets and implementing the improvement activities.

Impact of program implementation changes: In addition to the adjustments to the data collection process described above, DESE implemented a mileage reimbursement for providers traveling to the natural environment to provide services. After much stakeholder input, it was suggested that providers may be more willing to travel to the natural environment and to make the necessary arrangements to begin services in a timely manner if they were paid for that travel. Payments began for dates of service on and after February 1, 2007. While many providers do claim travel reimbursement, the total number of claims has not been as high as was originally expected and many providers declined travel reimbursement because of existing tax deductions established for their businesses.

The analysis of data by service type described above will continue in order to assist regional offices to target provider recruitment efforts.

Transdisciplinary Service Training: Statewide provider trainings on the primary provider model and team approaches to early intervention services were conducted in February and March 2007. Eight hundred providers attended these two-day trainings. The intent of the training was to provide those working in the First Steps program with current research-based practice in the field of early intervention. Dr. Robin McWilliam from Vanderbilt Children's Hospital conducted the trainings and has continued to work with selected state and regional staff to address implementation of the model for Missouri's program. DESE is currently entertaining pilot proposals from several SPOE contractors to implement the team approach in our rural areas of the state. This approach is expected to improve the provider availability issues in our rural areas.

Correction of Previous Noncompliance: The 2005-06 data showed Missouri out of compliance with this requirement. The state viewed the compliance determination as a statewide issue and took steps to correct the deficiencies within the statewide system that made reporting of accurate data impossible. Beginning with local monitoring activities in 2007-08, individual SPOE regions, including DMH, will be evaluated annually for compliance and corrective action plans will be issued when applicable at the local level. In addition, all service coordinators have been instructed to address

compensatory services with the IFSP team immediately following the delay of services due to issues associated with provider availability. Our program recognizes the importance of timely services and takes every action possible to ensure that children and families receive the required services as soon as possible; however, if delays do occur because of provider shortages, compensatory services are discussed and implemented as directed by the IFSP team.

During the review of individual child files for monitoring purposes, should the lead agency identify non-compliance with timely services, the SPOE will receive a written report identifying the non-compliance and a corrective action plan for that specific child will be ordered. At this time no individual children have been identified with non-compliance and no outstanding corrective actions exist.

Revisions, <u>with Justification</u>, to Proposed Targets / Improvement Activities / Timelines / Resources for 2006-07:

No revisions were made to targets or improvement activities in the State Performance Plan.

Part C State Annual Performance Report (APR) for 2006-07

Monitoring Priority: Early Intervention Services In Natural Environments

Indicator 2: Percent of infants and toddlers with IFSPs who primarily receive early intervention services in the home or programs for typically developing children.

(20 U.S.C. 1416(a)(3)(A) and 1442)

Measurement: Percent = [(# of infants and toddlers with IFSPs who primarily receive early intervention services in the home or programs for typically developing children) divided by the (total # of infants and toddlers with IFSPs)] times 100.

FFY	Measurable and Rigorous Target
2006-07	95.0% of infants and toddlers with IFSPs will primarily receive early intervention services in the home or programs for typically developing children

Actual Target Data for 2006-07:

Missouri exceeded the 2006-07 target for this indicator with 97.4% of children served in the home or programs for typically developing children.

Primary Setting for children under 3 years of age with active						
IFSPs	12/1/2004	%	12/1/2005	%	12/1/2006	%
Home	3,126	90.7%	3,120	92.4%	2,935	91.3%
Program Designed for Typically Developing Children						
(Community Setting)	212	6.2%	152	4.5%	198	6.2%
Total		96.9%		96.9%		97.4%
Program Designed for Children with Developmental Delay or						
Disabilities	78	2.3%	72	2.1%	58	1.8%
Service Provider Location	11	0.3%	7	0.2%	0	0.0%
Hospital (Inpatient)	16	0.5%	22	0.7%	14	0.4%
Other Setting	2	0.1%	2	0.1%	9	0.3%
Residential Facility	0	0.0%	1	0.0%	2	0.1%
Total Other		3.1%		3.1%		2.6%

Discussion of Improvement Activities Completed <u>and</u> Explanation of Progress or Slippage that occurred for 2006-07:

Primary setting data in Missouri continues to show a very high percentage of children served in their natural environment.

Improvement activities for the 2006-07 year included the following:

- Implement regular data reviews and analyze service location data by region, demographic variables and service types in order to target specific areas, groups, services or provider agencies
- During the data review process, assign consultants to investigate specific agencies where there is a high level of services in a special purpose center and assist in development and implementation of improvement plans or corrective actions where necessary

Discussion of these improvement activities follows:

Data reviews: Data on service settings continue to be reviewed by the Division. Providing services in the natural environment is a priority in the First Steps system, and its importance is understood by all staff working within the program. The data on location of services were reviewed throughout 2006-07 with the vast majority of services being provided in the natural environments.

Data investigations: While these data continue to show a very high percentage of children served in the natural environment, we continue to review these data on an ongoing basis. Should the data indicate a need for investigation, the First Steps Area Directors would be deployed to look into the situations. In order to ensure that IFSP teams are making individualized decisions regarding the settings in which infants and toddlers receive early intervention services, monitoring activities include the review of justification statements in the event that services are provided outside of the natural environment.

Revisions, <u>with Justification</u>, to Proposed Targets / Improvement Activities / Timelines / Resources for 2006-07:

No revisions to targets or improvement activities have been made in the State Performance Plan.

Part C State Annual Performance Report (APR) for 2006-07

Monitoring Priority: Early Intervention Services In Natural Environments

Indicator 3: Percent of infants and toddlers with IFSPs who demonstrate improved:

- A. Positive social-emotional skills (including social relationships);
- B. Acquisition and use of knowledge and skills (including early language/ communication); and
- C. Use of appropriate behaviors to meet their needs.

(20 U.S.C. 1416(a)(3)(A) and 1442)

Measurement: See State Performance Plan

FFY	Measurable and Rigorous Target
2006-07	See State Performance Plan

Actual Target Data for 2006-07:

Not Applicable for the 2006-07 APR – See the Missouri State Performance Plan

Discussion of Improvement Activities Completed <u>and</u> Explanation of Progress or Slippage that occurred for 2006-07:

Not Applicable – See the Missouri State Performance Plan

Revisions, <u>with Justification</u>, to Proposed Targets / Improvement Activities / Timelines / Resources for 2006-07:

Not Applicable – See the Missouri State Performance Plan

Part C State Annual Performance Report (APR) for 2006-07

Monitoring Priority: Early Intervention Services In Natural Environments

Indicator 4: Percent of families participating in Part C who report that early intervention services have helped the family:

- A. Know their rights;
- B. Effectively communicate their children's needs; and
- C. Help their children develop and learn.

(20 U.S.C. 1416(a)(3)(A) and 1442)

Measurement:

- A. Percent = [(# of respondent families participating in Part C who report that early intervention services have helped the family know their rights) divided by the (# of respondent families participating in Part C)] times 100.
- B. Percent = [(# of respondent families participating in Part C who report that early intervention services have helped the family effectively communicate their children's needs) divided by the (# of respondent families participating in Part C)] times 100.
- C. Percent = [(# of respondent families participating in Part C who report that early intervention services have helped the family help their children develop and learn) divided by the (# of respondent families participating in Part C)] times 100.

FFY	Measurable and Rigorous Target
2006-07	4A, 4B, 4C: 95% of parents will agree or strongly agree with the survey items

Actual Target Data for 2006-07:

The state met the 2006-07 targets for indicators 4B and 4C, with family survey data indicating 95.6% and 96.3% agreement, respectively. The state did not meet the target for 4A with an agreement rate of 92.3%.

Prior to sending out the annual First Steps Family Survey in spring 2007, the Division worked with personnel from the University of Missouri Office of Social and Economic Data Analysis (OSEDA) to address the following topics:

- Response rate
- Representative sample
- Non-response bias
- Survey questions

As a result of these conversations, several changes were made to the survey. Many of the changes split a single question into two so that different topics were not covered by one question. The changes to questions resulted in slight modifications in how the data for this SPP/APR indicators are compiled. The changes do not result in a change to the baseline. There are now two survey questions each for 4A and 4B, and only one for 4C. OSEP's response to Missouri's February 2007 SPP submission required that, when two survey questions were used, we must clarify which data set is to be used. This has been clarified in the SPP for Indicator 4C. For this, and subsequent APRs, where two survey questions are being used, the responses are averaged to determine the actual data for the indicator.

The other topics are addressed after the family survey data.

Survey Instrument: The complete parent survey can be found at http://dese.mo.gov/divspeced/FirstSteps/documents/2007CFOSurvey.pdf.

Family Survey Data

A. Percent of families participating in Part C who report that early intervention services have helped the family know their rights

Q10. I received Information and explanations about our family's rights to file a child complaint.

	Family Survey 2007			
Strongly Agree	484	48.3%	91.9%	
Agree	438	43.7%	91.9%	
Disagree	54	5.4%	8.1%	
Strongly Disagree	27	2.7%	0.1%	

Q11. I received Information and explanations about our family's procedural safeguards.

	Family Survey 2007			
Strongly Agree	461	45.8%	92.8%	
Agree	473	47.0%	92.8%	
Disagree	59	5.9%	7.2%	
Strongly Disagree	14	1.4%	1.270	

Average affirmative response for questions related to Indicator 4A: Average of 91.9% and 92.8% = 92.3%

B. Percent of families participating in Part C who report that early intervention services have helped the family effectively communicate their children's needs

Q24. Since being part of First Steps, I can work with professionals.

	Family Survey 2007			
Strongly Agree	462	50.7%	96.5%	
Agree	418	45.8%	90.5%	
Disagree	26	2.9%	3.5%	
Strongly Disagree	6	0.7%	3.576	

Q25. Since being part of First Steps, I know how to advocate for what my child needs.

	Family Survey 2007			
Strongly Agree	475	49.5%	94.8%	
Agree	435	45.3%	94.8%	
Disagree	40	4.2%	5.2%	
Strongly Disagree	10	1.0%	3.276	

Average affirmative response for questions related to Indicator 4B: Average of 96.5% and 94.8% = 95.6%

C. Percent of families participating in Part C who report that early intervention services have helped the family help their children develop and learn

Q19. First Steps services give my family the tools to directly improve my child's development.

	Family Survey 2007			
Strongly Agree	574	55.9%	06.20/	
Agree	415	40.4%	96.3%	
Disagree	29	2.8%	3.7%	
Strongly Disagree	9	0.9%	3.7 /0	

Affirmative response for question related to Indicator 4C: 96.3%

The survey response rate for 2006-07 was 34.2%.

OSEDA Survey and Analysis: As mentioned above, the Division worked with the University of Missouri Office of Social and Economic Data Analysis (OSEDA) to re-format the First Steps Family Survey. The new items were designed to both meet the reporting requirements of the Department, and to be formatted in such a way as to enhance subsequent analysis. In addition to changes in the items, a split survey methodology was used to explore the use of sampling versus a census approach to gathering yearly data.

In previous years, the Department has used a census approach, anonymously surveying all appropriate families, to gather data. Although this approach provides all families receiving services an opportunity to respond, it does not allow for follow-up because there is no way to know who has and has not responded at any particular time. An alternative method is to sample from the pool of families, with each questionnaire linked to a database of names and addresses so that non-respondents can be contacted.

The sampling method allows the investigator to obtain a larger response rate through follow-up activities, but also has the potential to provide biased data because respondents know that their information is linked to their identity. To investigate the amount of bias induced by using non-anonymous data collection methods, the Department asked OSEDA to survey a portion of families, approximately 25%, using identifiable methods, while still maintaining anonymity of responses with respect to the Department itself. The remainder of families were all surveyed by the Department.

When response rates were examined by SPOE region, no large disparities in response rate are apparent between SPOEs using either method. This suggests that the survey results are representative of the state as a whole. Subsequent analyses confirm that no statistically significant level of bias was introduced using the sample methodology. The sampling method did, however, produce a significantly higher response rate than in previous years, approximately 1½ times that of the single-mailing anonymous method. Neither T-tests (parametric) nor Chi-square tests (non-parametric) showed a statistically significant difference between the responses of mass-mail and sampled respondents. Alpha was set at .05 for all tests. This means that no apparent bias due to survey method was induced in the responses, that either method is appropriate according to the Department's needs, and that the data from both survey methods can be appropriately combined for the purposes of this report.

OSEDA contacted non-respondents from the original mailing, and obtained an additional 14% return. The OSEDA follow-up therefore consists of non-respondents. If bias on the part of non-respondents was present, their responses would cause the overall OSEDA data to be statistically different from the Department's. Summary analysis indicates no statistically significant difference between the Department's and OSEDA's data, and therefore no bias is indicated.

The conclusion drawn by OSEDA and the Division is that the data are valid and reliable, and adequately represent the population of the First Steps program.

Discussion of Improvement Activities Completed <u>and</u> Explanation of Progress or Slippage that occurred for 2006-07:

Improvement activities for the 2006-07 year included the following:

- Improve return rate on the surveys by developing scripts for service coordinators to use with parents that explains how it is used, the importance of it to program evaluation and improvement
- Further analysis of family survey to address scales related to the SPP indicators

Discussion of these improvement activities follows:

Improve return rate: The Division developed a script for service coordinators to use when talking to families about the spring 2007 survey. It is unknown to what extent the service coordinators used the script with families, but the return rate to DESE's survey was 31.3%, an increase of approximately 3% over the previous year. The return rate for the identified sample surveyed by OSEDA

was significantly higher at 44.1%. This resulted in an overall return rate of 34.2%. The Division will use this information to determine the surveying methodology to use in the future.

Analysis of family survey data: OSEDA conducted a factor analysis, which is a means of combining items that are related into scales, each scale summarizing data from the items. Principal components factor analysis shows that the responses to the family survey can be divided into five areas (scales), each having two or more items that are related. Items within a scale can be summed or averaged for each respondent, resulting in five scales that summarize the data for many items.

Family newsletter: An improvement activity to develop a parent newsletter, was slated to begin in 2007-08; however the first edition of the Parent Connections newsletter was completed ahead of schedule and was disseminated in summer 2007.

Revisions, <u>with Justification</u>, to Proposed Targets / Improvement Activities / Timelines / Resources for 2006-07:

No revisions to targets have been made in the State Performance Plan. One improvement activity has been added to address the need for training for service coordinators regarding the provision of child complaint and due process information to families (see SPP page 16). Per OSEP's instructions in the 2005-06 APR Response Table, the baseline for 4C has been clarified in the SPP (see SPP page 14).

Part C State Annual Performance Report (APR) for 2006-07

Monitoring Priority: Effective General Supervision Part C / Child Find

Indicator 5: Percent of infants and toddlers birth to 1 with IFSPs compared to:

- A. Other States with similar eligibility definitions; and
- B. National data.

(20 U.S.C. 1416(a)(3)(B) and 1442)

Measurement:

- A. Percent = [(# of infants and toddlers birth to 1 with IFSPs) divided by the (population of infants and toddlers birth to 1)] times 100 compared to the same percent calculated for other States with similar (narrow, moderate or broad) eligibility definitions.
- B. Percent = [(# of infants and toddlers birth to 1 with IFSPs) divided by the (population of infants and toddlers birth to 1)] times 100 compared to National data.

FFY	Measurable and Rigorous Target
2006-07	0.73% of infants and toddlers birth to 1 will have IFSPs

Actual Target Data for 2006-07:

At 0.64% of children birth to age 1 served by Missouri's First Steps program, the state did not meet the 2006-07 target.

Percent of Children Birth to Age 1 with IFSPs

	Dec-04	Dec-05	Dec-06
Child Count	514	547	500
Estimated			
Population*	76,771	77,970	78,424
Missouri	0.67%	0.71%	0.64%

^{*} December 2006 Estimated Population from US Bureau of Census

States with Narrow Eligibility Criteria and National Data (Excluding At Risk) December 2006 Birth to 1 Child Count / 2006 Population Estimates

MISSOURI0.64%National Data1.04%

1.96%
1.70%
1.29%
1.13%
0.96%
0.82%
0.71%
0.70%
0.70%
0.68%
0.67%
0.62%
0.61%
0.60%
0.45%

Source: Data from http://www.rrfcnetwork.org/content/view/409/47/#c5

Discussion of Improvement Activities Completed <u>and</u> Explanation of Progress or Slippage that occurred for 2006-07:

The two main contributors to the drop in Missouri's Child Count percentages were as follows: a significant drop in referrals from February 2005 through January 2006, and the continued growth of Missouri's overall population.

Drop in Referrals: In the 12-month span beginning in February 2005 and ending in January 2006, there were 5,079 referrals made to the First Steps system. This compares to a total of 5,715 from February 2004 to January 2005. In late January 2005, the Governor's recommended budget for the State of Missouri eliminated funding for the First Steps system creating statewide concern among all stakeholders as to the viability of the Part C Early Intervention system. Due to the efforts of various stakeholder groups, the budget for the First Steps program was restored, but an apparent lack of confidence in the future of the program appears to have coincided with a steady drop in referral numbers. This in part has contributed to a lower number of children in the program as of 12/1/2006. Compounding the decrease in child count is an increasing estimated population in the state.

Referrals have rebounded recently. From February 2006 to January 2007, referrals increased to 5,437, and child count numbers have rebounded strongly. Preliminary December 1, 2007, data shows 3,376 active IFSPs (1.43% of the 2006 estimated Missouri birth-3 population), 600 of which are for children under 1 year of age (0.77% of the 2006 estimated Missouri birth-1 population). This shows a 20% increase in children served between the ages of 0 and 1, and an overall 5% increase in children served between 0 and 3.

Improvement activities for the 2006-07 year included the following:

- Analyze RICC Child Find plans to determine impact of actions on locating additional eligible children
- Work with Early Head Start/Head Start to increase identification of and inclusion of children with disabilities in those programs.
- Continue to support PAT National Center training of parent educators on appropriate FS referrals and serving families with special needs children
- Contract to develop a statistical model to forecast the number of children eligible for Missouri First Steps
- Continue to work with birth defect data from the Department of Health and Senior Services to evaluate child find efforts
- Analyze data to target referral sources with high percentage of inappropriate referrals, promote referrals from underserved populations and educate primary referral sources (NICU, PAT, pediatricians, CAPTA, Newborn Hearing Screening)
- Analyze data to determine the number of children who meet First Steps eligibility criteria but whose parents refused services to assess impact on the system

Discussion of these improvement activities follows:

RICC Child Find, Early Head Start/Head Start, PAT National Center: The percentage of children served in Missouri has fluctuated over the last several years. In order to address that fluctuation, each of the ten (10) regional interagency coordinating councils (RICC) focus a significant amount of their work on child find activities. For the 2006-2007 reporting period all RICCs reported activities including collaboration with *Head Start* offices, *Parents as Teachers* (PAT) which is a required program in every public school in Missouri, local community hospitals and physician's offices, *Success by 6*, local early childhood programs, community resource and children's fairs. In addition, RICCs were involved in the improvement and distribution of print materials. Two RICCs in the state's largest metropolitan area which represent almost half of the statewide child count, implemented radio spots informing the general public about the program.

Statistical Model/Birth Defects Data: In addition to this work at the local level, the state agency contracted with a statistical analysis and forecasting firm (Philips and Associates of St. Louis, MO) to review the state's eligibility criteria and develop a model to predict the percentage of eligible children that may require Part C services. This study included multiple components: 1) a gap analysis using a prevalence measure for each variable as compared to the state's current performance level for each of the key variables; 2) conversion of that information to a goal range for each region of the state by First Steps System Point of Entry (SPOE) offices; and 3) a forecasting model to predict the potential impact, should the state decide to change eligibility criteria to a level of developmental delay that is less than the current 50%.

The conclusions drawn from the study indicated that the current eligibility criteria in Missouri would place the child find goals within a range of 1.65 to 1.85 percent of the population ages birth to three, with 1.75 percent as the median point of the range. The study applied this range to the existing child count numbers for each of the ten (10) SPOE regions. At the time of the study's release (June 7, 2007) the child count for four (4) of the SPOE regions was at or within ten (10) children of meeting the low end of the range. Overall the state was 0.18% below the lowest end of the established range or 417 children below our lowest target point of 1.65%.

The state intends to use this study and the information provided to target specific regions of the state where child count numbers continue to be significantly below the target range. The full report can be found at http://dese.mo.gov/divspeced/FirstSteps/pdfs/SICC/PhillipsandAssociatesReport09_07.pdf.

Referral Sources: An additional area of concern for the state is the number of referrals received where children are found ineligible for the program. This percentage continues to climb with the current rate approaching 60%. Missouri's stringent criteria for demonstrated developmental delay is thought to be part of the reason for this high percentage of ineligible children; however, the need to educate the primary referral sources about the program's criteria and intent is of continued importance. The on-going activities outlined in the SPP are intended to support this need and have not been revised.

Quarterly data reviews continue to include child count, eligibility and referral source information by SPOE. SPOE quarterly reports during 2006-07 required SPOEs to address their eligibility rates by referral source. A revision to the quarterly reports for 2007-08 will require SPOEs to address child find if their participation rates are below the range identified by the forecasting discussed above.

Refused Services: Monthly data reports by SPOE include adjusted IFSP numbers that account for children found eligible but are withdrawn by the families from the program. On average, the adjustment increases the participation rate by 0.1-0.2%. For instance, for the preliminary December 1, 2007, child count figure referenced above, the 'adjusted' active IFSPs total is 3,648 for ages 0-3 (1.54% of the population) and 618 for age 0-1 (0.78%).

The new SPOE contracts include a performance measure for the percent of the population served. SPOEs with less than the allowable percent could be assessed liquidated damages upon contract renewal. Seven SPOEs received liquidated damages through the contract due, at least in part, to their participation rates. For the contract renewal period of 2007-2008, the lead agency used the 1.65% child count percentage from the Philips study discussed earlier in this report.

Revisions, <u>with Justification</u>, to Proposed Targets / Improvement Activities / Timelines / Resources for 2006-07:

No revisions to targets or improvement activities have been made in the State Performance Plan.

Part C State Annual Performance Report (APR) for 2006-07

Monitoring Priority: Effective General Supervision Part C / Child Find

Indicator 6: Percent of infants and toddlers birth to 3 with IFSPs compared to:

- A. Other States with similar eligibility definitions; and
- B. National data.

(20 U.S.C. 1416(a)(3)(B) and 1442)

Measurement:

- A. Percent = [(# of infants and toddlers birth to 3 with IFSPs) divided by the (population of infants and toddlers birth to 3)] times 100 compared to the same percent calculated for other States with similar (narrow, moderate or broad) eligibility definitions.
- B. Percent = [(# of infants and toddlers birth to 3 with IFSPs) divided by the (population of infants and toddlers birth to 3)] times 100 compared to National data.

FFY	Measurable and Rigorous Target
2006-07	1.57% of infants and toddlers birth to 3 will have IFSPs

Actual Target Data for 2006-07:

At 1.37% of children birth to age 3 served by Missouri's First Steps program, the state did not meet the 2006-07 target.

Percent of Children Birth to Age 3 with IFSPs

	Dec-04	Dec-05	Dec-06
Child Count	3,445	3,376	3,216
Population Estimate	225,324	228,675	234,751
Missouri %	1.53%	1.48%	1.37%

States with Narrow Eligibility Criteria and National Data (Excluding At Risk) Comparison of December 2006 Birth to 3 Child Count / 2006 Population Estimates

MISSOURI	1.37%
National Data	2.43%

Connecticut	3.41
North Dakota	3.11
Idaho	2.77
Maine	2.42
South Carolina	1.98
Oklahoma	1.97
Montana	1.94
Utah	1.84
Arizona	1.81
Oregon	1.80
Nebraska	1.74
Tennessee	1.67
District of Columbia	1.40
Nevada	1.36
Georgia	1.26

Source: Data from http://www.rrfcnetwork.org/content/view/409/47/#c5

Discussion of Improvement Activities Completed <u>and</u> Explanation of Progress or Slippage that occurred for 2006-07:

As with the birth to 1 population discussed in Indicator 5, there were two main contributors to the drop in Missouri's Child Count percentages: a significant drop in referrals from February 2005 through January 2006, and the continued growth of Missouri's overall population. See the discussion for Indicator 5 for information about both the birth to 1 and birth to 3 groups.

Revisions, <u>with Justification</u>, to Proposed Targets / Improvement Activities / Timelines / Resources for 2006-07:

No revisions to targets or improvement activities have been made in the State Performance Plan.

Part C State Annual Performance Report (APR) for 2006-07

Monitoring Priority: Effective General Supervision Part C / Child Find

Indicator 7: Percent of eligible infants and toddlers with IFSPs for whom an evaluation and assessment and an initial IFSP meeting were conducted within Part C's 45-day timeline.

(20 U.S.C. 1416(a)(3)(B) and 1442)

Measurement:

Percent = [(# of eligible infants and toddlers with IFSPs for whom an evaluation and assessment and an initial IFSP meeting was conducted within Part C's 45-day timeline) divided by the (# of eligible infants and toddlers evaluated and assessed)] times 100.

Account for untimely evaluations.

FFY	Measurable and Rigorous Target
2006-07	100.0% of eligible infants and toddlers with IFSPs will have an evaluation and assessment and an initial IFSP meeting conducted within Part C's 45-day timelines

Actual Target Data for 2006-07:

While not meeting the target of 100%, the state, at 95.1% shows a very high percent of compliance with the 45-day timeline requirement.

Referrals resulting in IFSPs

	2005-06	2006-07
# IFSPs with acceptable timelines *	2,332	2,388
Total IFSPs	2,566	2,510
% with acceptable timelines	90.9%	95.1%

^{* &}quot;Acceptable timelines" includes those evaluations and initial IFSP meetings completed within the 45-day timeline as well as those that went over 45 days due to parent or child reasons. Both the IFSPs with acceptable timelines (numerator) and the total IFSPs (denominator) include children whose delays were due to exceptional family circumstances. See explanation below for more information.

The following table provides detail on the reasons for exceeding the 45 day timeline. These reasons are required to be entered by service coordinators in the web system if a referral exceeds 45 days.

Reasons for Exceeding Timelines for Referrals from July 1, 2006, to June 30, 2007, Resulting in IFSPs	'Acceptable' Reasons			ole' Reasons on Provided		
	Parent/Child Delay	SPOE Delay	Provider Delay	Provider Availability Delay	No Reason	Grand Total
Total	425	12	24	2	3	466
% of Total	91.2%	2.6%	5.2%	0.4%	0.6%	100.0%

Initial figures showed that 98.4% (2,469 of 2,510) of Initial IFSPs fell within the 45-day timeline once Parent/Child delays were taken into account. However, due in part to the high percentage of Parent/Child Delays, DESE's Area Directors investigated case notes for roughly 25% of children given Parent/Child Delay reasons to determine if those reasons were valid, meaning that the timeline delay was caused by hospitalizations, family vacations, or general non-response from families. The review revealed that 19% of Parent/Child Delays were not valid. Either SPOEs or providers were clearly responsible for documented delay, or case notes did not show any reason why the parents or child contributed to the 45-day timeline being exceeded. Therefore DESE adjusted its overall timeline numbers to account for this as shown below. 19% of all the Parent/Child Delays were subtracted from the "acceptable timelines" figure above.

45 Day Timeline Calculation Details	Prior to adjustment	Adjusted
Total Referrals	2,510	2,510
Referrals under 45 days	2,044	2,044
Referrals over 45 days with acceptable reasons (adjusted number removes 19% of acceptable reasons (425 – (19% of 425) = 344))	425	344
Referrals over 45 days with unacceptable reasons (adjusted number adds 19% of acceptable reasons (41 + (19% of 425) = 122))	41	122
Total under 45 days or with acceptable reasons	2,469	2,388
Percent under 45 days or with acceptable reasons	98.4%	95.1%

For children whose 45-day timelines were not met, the delays ranged from one to 152 day delays, with approximately half having delays of less than 15 days. Another 30% of the delays were between 15 and 30 days. As indicated in the table above, most delays were due to exceptional family circumstances including child or family medical issues and scheduling difficulties for the parents. Of the five longest delays, four were due to exceptional family circumstances and the last due to a SPOE's inability to obtain medical records needed for eligibility determination. This SPOE delay was not considered acceptable.

Discussion of Improvement Activities Completed <u>and</u> Explanation of Progress or Slippage that occurred for 2006-07:

While the state did not meet the target of 100% for 2006-07, a percentage of over 95% shows significant improvement from the previous year.

Improvement activities for the 2006-07 year included the following:

- DESE will review data reports by SPOEs regarding 45 day timelines. SPOEs exceeding 45 day timelines are identified and actions are taken to facilitate correction including deploying consultants and requiring corrective actions
- Analyze data by location and child demographics in order to target technical assistance to areas/groups in need
- Analyze impact of transportation reimbursement, employment of providers and RICC/SPOE provider recruitment activities in order to track trends and target provider recruitment

Discussion of these improvement activities follows:

Data Reviews and Analysis: 45 day timelines by SPOE are reviewed on a regular basis. Throughout 2006-07, all SPOEs were over 90% in compliance with the timeline requirement.

Transportation Reimbursement and Provider Recruitment: DESE implemented a mileage reimbursement for providers traveling to the natural environment to provide services. Payments began for dates of service on and after February 1, 2007. In general, the transportation reimbursement did not have a significant impact on provider availability/recruitment. However, some areas of the state indicated that it was easier to find evaluators after the transportation reimbursement was put in place.

Correction of Previous Noncompliance: As reported in the 2005-06 APR, the state's compliance rate was 90.9%. Of the ten SPOEs in place after inception of the new SPOE contract, as of February 1, 2006, only one SPOE was found out of compliance with 45-day timeline requirements. That SPOE was cleared of the noncompliance within 12 months through a follow-up monitoring review.

Revisions, <u>with Justification</u>, to Proposed Targets / Improvement Activities / Timelines / Resources for 2006-07:

No revisions to targets or improvement activities have been made in the State Performance Plan.

Part C State Annual Performance Report (APR) for 2006-07

Monitoring Priority: Effective General Supervision Part C / Effective Transition

Indicator 8: Percent of all children exiting Part C who received timely transition planning to support the child's transition to preschool and other appropriate community services by their third birthday including:

- A. IFSPs with transition steps and services;
- B. Notification to LEA, if child potentially eligible for Part B; and
- C. Transition conference, if child potentially eligible for Part B.

(20 U.S.C. 1416(a)(3)(B) and 1442)

Measurement:

- A. Percent = [(# of children exiting Part C who have an IFSP with transition steps and services) divided by the (# of children exiting Part C)] times 100.
- B. Percent = [(# of children exiting Part C and potentially eligible for Part B where notification to the LEA occurred) divided by the (# of children exiting Part C who were potentially eligible for Part B)] times 100.
- C. Percent = [(# of children exiting Part C and potentially eligible for Part B where the transition conference occurred) divided by the (# of children exiting Part C who were potentially eligible for Part B)] times 100.

FFY	Measurable and Rigorous Target
2006-07	100% of all children exiting Part C will receive timely transition planning by their third birthday

Actual Target Data for 2006-07:

While not meeting the target of 100%, the state has significantly improved the percent in compliance with transition planning requirements. The percents in compliance for 8A, 8B and 8C were 92.7%, 90.0% and 78.1%, respectively.

	# of files reviewed	# in compliance	# out of compliance	% in compliance
A: IFSPs with transition steps and services	165	153	12	92.7%
B: Notification to LEA, if child potentially eligible for Part B	165	150	15	90.9%
C: Transition conference, if child potentially eligible for Part B	1038	811*	227	78.1%

^{*} The number in compliance for 8C is adjusted for exceptional family circumstances as described below.

The results for A and B were gathered from reviews of 15 randomly selected files of children who exited the program during 2006-2007 from each of five SPOEs and six DMH regional centers.

Results for C were gathered from a data review of all children transitioning from Part C to Part B from July 1, 2006 to June 30, 2007. A change for the 2006-07 data included the collection of reasons for delayed transition conferences. Reasons were gathered for approximately 23% of the delayed transition conferences. Results showed that 47.1% of the delays were due to acceptable child/family reasons such as child or family illness, family vacation, etc. The total number of children with delayed transition conferences was then adjusted to account for these acceptable reasons. These exceptional family circumstances have been included in the numerator and denominator of the calculation for indicator 4C.

Transition conference data was examined by age of child at the time of the conference. The analysis revealed that 54.9% of conferences are held by the age of 30 months (without adjustment for exceptional family circumstances). State standards require that transition meetings need to occur "six months prior" to the child's third birth date. Using the federal standard of at least 90 days prior to the third birthday, Missouri would have an additional 38.9% compliance rate, resulting in 93.8% compliance prior to taking acceptable reasons into account.

During stakeholder discussions of this indicator, parents, providers and other early intervention professionals suggested that Missouri's current requirement for a transition meeting by age 2.5 may not be appropriate. Parents reported that they were not always ready to make decisions about transition plans until just before their child turned 3 years old. While they do discuss their options for services after their child's third birthday on an ongoing basis, many parents indicated that they were not ready to hold a transition meeting with the school district at 2.5 years; therefore, the state will consider the possibility of a change to the current requirement in an effort to add more flexibility for families during the transition process.

Discussion of Improvement Activities Completed <u>and</u> Explanation of Progress or Slippage that occurred for 2006-07:

The state did not meet the 100% target for this indicator; however, significant improvement is seen in Indicators 8A and 8B with compliance levels of more than 90%. Timely transition conferences (8C) continue to be a challenge for the state, but the rate of compliance increased significantly from the previous year (57.0% for 2005-06).

Improvement activities for the 2006-07 year included the following:

- Update, implement and evaluate the Part C to Part B transition training for Part C and 619 personnel for technical assistance and corrective action purposes.
- Monitor data reports and results of compliance monitoring in the area of C to B transition for targeting technical assistance
- Analyze data to determine the best option for LEA notification of upcoming transition children
- Use State Improvement Grant (SIG) funds to develop and implement a new Transition Module

Discussion of these improvement activities follows:

Part C to B Transition Training: Comprehensive Statewide transition training will be conducted every other year and is scheduled for the 2007-2008 year. Individual SPOE regions and DMH regional centers were provided with targeted assistance on an as-needed basis by consultants during 2006-2007. With implementation of the new transition module, discussed below, it was determined that biennial face to face trainings would be sufficient to ensure full compliance with this indicator.

Monitor data reports: Monthly and Quarterly reviews of transition data allow the lead agency to provide targeted assistance to regions on an as-needed basis.

LEA Notification: Based on an analysis of data the lead agency continues to hold the SPOEs and DMH responsible for notifying the LEA of children about to transition to Part B services.

New Transition Module: Missouri used State Improvement Grant (SIG) funds to develop and implement a more comprehensive Transition Module addressing the Part C requirements as well as the

significance to early childhood special education under Part B. DESE collaborated with the early childhood department at a state university to assist with the development of this module. The module was completed in fall 2007 and is available at http://dese.tekdevelopment.com/401.html

Correction of previous noncompliance: Data in the 2005-06 APR was broken out by SPOE Service Coordinators, DMH Service Coordinators and Independent Service Coordinators and included data gathered during initial and follow-up reviews conducted during 2005-06. As of February 2006, Independent Service Coordinators were no longer a part of the Part C system, and the SPOE regions were reconfigured with the total number of regions reduced from 24 to 10. In cases where noncompliance was attributable to entities that are no longer involved with the program, the noncompliance was transferred to the new responsible entity when appropriate. For Indicator 8A, 20 of 22 findings were corrected within one year, for 8B, 38 of 44, and for 8C, 15 of 22. As of July 2007, all noncompliance had been cleared.

OSEP's response table to the 2005-06 APR indicated that the state did not disaggregate the information about correction of noncompliance for 8A, 8B and 8C. The only previous noncompliance remaining from 2004-05 reviews that had not been corrected as of the 2005-06 APR was under 8C and was attributed to one DMH Regional Center. The Regional Center, under sanction from May 11, 2007 to December 31, 2007, was required to submit monthly data documenting all transition meetings held and reasons for exceeding timelines, if applicable. The Regional Center corrected the last area of noncompliance in December 2007. A final report was sent in January 2008, notifying them that the noncompliance had been cleared.

Revisions, <u>with Justification</u>, to Proposed Targets / Improvement Activities / Timelines / Resources for 2006-07:

No revisions to targets or improvement activities have been made in the State Performance Plan.

Part C State Annual Performance Report (APR) for 2006-07

Monitoring Priority: Effective General Supervision Part C / General Supervision

Indicator 9: General supervision system (including monitoring, complaints, hearings, etc.) identifies and corrects noncompliance as soon as possible but in no case later than one year from identification.

(20 U.S.C. 1416(a)(3)(B) and 1442)

Measurement:

Percent of noncompliance corrected within one year of identification:

- a. # of findings of noncompliance
- b. # of corrections completed as soon as possible but in no case later than one year from identification.

Percent = [(b) divided by (a)] times 100.

For any noncompliance not corrected within one year of identification, describe what actions, including technical assistance and/or enforcement that the State has taken.

FFY	Measurable and Rigorous Target
2006-07	100% of noncompliance will be corrected as soon as possible but in no case later than one year from identification

Actual Target Data for 2006-07:

At 92.4%, Missouri did not meet the 100% target for correction of non-compliance within twelve months.

A total of 9 DMH regional centers, 20 independent service coordinators and 52 service providers received initial monitoring reviews during 2005-06. Results of these reviews are provided in the tables below. The columns of the tables are as follows:

- # of EI providers monitored the total number of providers monitored in the specified area or the number of providers with noncompliance calls as a result of dispute resolution
- # of Findings of noncompliance identified in 2005-06 the total number of monitoring indicators found out of compliance across the providers reviewed. This is a duplicated count of providers when providers had more than one finding of noncompliance
- # of Findings for which correction was verified no later than one year from identification the total number of findings of noncompliance corrected within one year from the date of the reports to providers
- % of findings with correction within one year the percent of findings of noncompliance corrected within one year
- % of finding with correction as of July 2007 the percent of findings of noncompliance that had been corrected by the end of July 2007.

Indicator	General Supervision System Components	# of EI providers monitored	(a) # of Findings of noncompliance identified in 2005-06	(b) # of Findings from (a) for which correction was verified no later than one year from identification	% of findings with correction within one year (b)/(a)	% of finding with correction as of July 2007
1: Timely Services	Monitoring: On-site visits, self- assessment, desk review, etc.	78	139	137	98.6%	100.0%
	Dispute Resolution		6	6	100.0%	
2: Natural	Monitoring	26	13	13	100.0%	
Environments	Dispute Resolution		0	NA		
3: Early	Monitoring	26	14	14	100.0%	
Childhood Outcomes	Dispute Resolution		0	NA		
4: Family	Monitoring	26	120	111	92.5%	100.0%
Capacity	Dispute Resolution		3	3	100.0%	
5, 6: Child	Monitoring	0	0	NA		
Find	Dispute Resolution		0	NA		
7: 45-day	Monitoring	10	1	1	100.0%	
Timelines	Dispute Resolution		1	1	100.0%	
8A: Transition Steps and Services	Monitoring	26	83	73	88.0%	100.0%
	Dispute Resolution		0	NA		
8B: Transition Notification of LEA	Monitoring	26	44	38	86.4%	100.0%
	Dispute Resolution		0	NA		
8C: Transition Conference	Monitoring	26	22	15	68.2%	100.0%
	Dispute Resolution		0	NA		
	Total		448	414	92.4%	100.0%

Three (3) independent service coordinators with findings of noncompliance are not included in the table above. These service coordinators left the First Steps system shortly after being monitored, and were not employed by a SPOE after February 1, 2006. It was not possible to follow up on correction due to the minimal time frame between the issuance of the corrective action and their departure from the system; however, any individual child noncompliance attributed to them was corrected after reassignment to a

new service coordinator. In addition, findings of noncompliance for two (2) early intervention providers who left the First Steps system shortly after receiving their corrective action letter were not included in the table above. The lead agency assigned the responsibility for any individual child noncompliance to the service coordinators for the children involved. In cases where services had not been provided in accordance with the IFSP, the service coordinators ensured that compensatory services were considered and provided, as determined appropriate.

Discussion of Improvement Activities Completed <u>and</u> Explanation of Progress or Slippage that occurred for 2006-07:

The state did not meet the target of 100% for this indicator, and showed slippage of approximately 3% from the previous APR. The findings of non-compliance reported in this APR reflect results of monitoring conducted in 2005-2006, and the correction of that non-compliance in 2006-2007. Toward the end of 2006, Missouri made significant changes in it's First Steps system (significant reduction in the number of SPOEs, change in SPOE contractors in a number of regions, change in contractual requirements which, among other things included more collaboration with DMH, and elimination of independent service coordination positions.) These changes were designed to address identified problems in the system and, while we now believe we are seeing the benefits of those changes, the year following this transition required numerous adjustments as new agencies took over SPOE contracts and in many cases, new staff needed to be trained. Therefore, the slippage in correction of non-compliance can largely be attributed to this period of adjustment in 2006-2007. Due to the systems currently in place, significant improvement with this indicator is expected in the future.

Improvement activities for 2006-07 included the following:

- Revise sanctions in state regulations and provider contracts
- Deploy consultants to specific SPOEs or providers based on data reviews and other information
- Implement web-based system for monitoring and self-assessment purposes
- Fully implement IFSP Quality Indicators Rating Scale to assess quality as well as procedural compliance

Discussion of these improvement activities follows:

Revise sanctions: Missouri did not change its state regulations or provider contracts in 2006-07, but will do so in conjunction with the finalization of federal regulations.

Deploy consultants: The lead agency has utilized consultants to assist SPOEs, DMH, and EI providers with specific issues identified through data and compliance monitoring reviews. Throughout 2006-07, these consultants were deployed to gather information and provide technical assistance as needed, to help ensure that EI providers and SPOE/DMH staff was informed about and operating under compliant procedures.

Implement web-based monitoring system: Missouri awarded a contract for the development of a web-based general supervision system, known as IMACS (Improvement Monitoring, Accountability and Compliance System), for both Part C and Part B in June 2006. As of December 2007, a large part of the Part B monitoring system has been developed. Development of Part C components has begun and will include the SPOE Quarterly Reports, QIRS reviews/data, compliance file reviews and corrective action plans. The system will send regular reminders to SPOEs, DMH and DESE regarding the status of noncompliance that has not yet been cleared in order to ensure correction within one year.

IFSP Quality Indicators Rating Scale: The IFSP Quality Indicators Rating Scale (QIRS) process was developed by lead agency staff, in conjunction with nationally recognized early childhood experts, to provide a "quality" evaluation instrument used to evaluate IFSPs. Throughout the year, the First Steps consultants provided training and technical assistance to each SPOE and DMH service coordinator regarding the QIRS process and expectations. QIRS reviews were conducted in all SPOE regions and targeted technical assistance was provided on specific issues identified during those reviews.

The SPOE contracts require that the region receive an overall score on the QIRS review in the "acceptable" to "high quality" range or liquidated damages will be applied to the next year's contract. For the 2006/2007 fiscal year, two (2) of the ten (10) SPOE regions received ratings below the acceptable level; therefore, the penalty was applied to the contract renewal for the 2007/2008 fiscal year.

The area directors will review the QIRS results with each SPOE office and hold training activities targeted to continue strengthening the quality of IFSP development. These efforts are intended to ensure that all children and families receive high quality intervention services through the First Steps program.

Correction of Noncompliance: The 2005-06 APR reported that the noncompliance identified for that year had all been corrected within 12 months with the exception of one DMH Regional Center. The Regional Center under sanction from May 11, 2007 to December 31, 2007, was required to submit monthly data documenting all transition meetings held and reasons for exceeding timelines, if applicable. The Regional Center corrected the last area of noncompliance in December 2007. A final report was sent in January 2008, notifying them that the noncompliance had been cleared.

Revisions, <u>with Justification</u>, to Proposed Targets / Improvement Activities / Timelines / Resources for 2006-07:

No revisions to targets or improvement activities have been made in the State Performance Plan.

Part C State Annual Performance Report (APR) for 2006-07

Monitoring Priority: Effective General Supervision Part C / General Supervision

Indicator 10: Percent of signed written complaints with reports issued that were resolved within 60-day timeline or a timeline extended for exceptional circumstances with respect to a particular complaint.

(20 U.S.C. 1416(a)(3)(B) and 1442)

Measurement: Percent = [(1.1(b) + 1.1(c))] divided by 1.1] times 100.

FFY	Measurable and Rigorous Target
2006-07	100% of signed written complaints with reports issued will be resolved within 60-day timeline or a timeline extended for exceptional circumstances

Actual Target Data for 2006-07:

During 2006-07, four child complaints were filed, all of which were investigated. All decisions (100%) were issued within 60 calendar days.

	2005-06	2006-07
Complaints with reports issued	19	3
Reports within timelines	14	3
Reports within extended timelines	5	0
Percent issued within 60 day or extended timelines	100%	100%

Discussion of Improvement Activities Completed <u>and</u> Explanation of Progress or Slippage that occurred for 2006-07:

Improvement activities for the 2006-07 year included the following:

Maintain current procedures to ensure continued compliance

DESE continues to use a database to record and monitor the timelines for issuance of child complaints. Reports are monitored to ensure that reports are issued within 60 days or, if not possible due to the nature of the complaint, appropriate extensions are made when necessary.

Revisions, <u>with Justification</u>, to Proposed Targets / Improvement Activities / Timelines / Resources for 2006-07:

No revisions have been made in the State Performance Plan.

Part C State Annual Performance Report (APR) for 2006-07

Monitoring Priority: Effective General Supervision Part C / General Supervision

Indicator 11: Percent of fully adjudicated due process hearing requests that were fully adjudicated within the applicable timeline.

(20 U.S.C. 1416(a)(3)(B) and 1442)

Measurement: Percent = [(3.2(a) + 3.2(b))] divided by 3.2] times 100.

FFY	Measurable and Rigorous Target
2006-07	100% of fully adjudicated due process hearing requests will be fully adjudicated within the applicable timeline

Actual Target Data for 2006-07:

During 2006-07, three due process hearing requests were received. Two were withdrawn and the third was dismissed, so no hearings were fully adjudicated.

Discussion of Improvement Activities Completed <u>and</u> Explanation of Progress or Slippage that occurred for 2006-07:

Improvement activities for the 2006-07 year included the following:

Maintain current procedures to ensure continued compliance

DESE continues to use a database to record and monitor the timelines for due process hearing requests. Missouri uses a 30-day timeline which does not provide for extensions.

Revisions, <u>with Justification</u>, to Proposed Targets / Improvement Activities / Timelines / Resources for 2006-07:

No revisions have been made in the State Performance Plan.

Part C State Annual Performance Report (APR) for 2006-07

Monitoring Priority: Effective General Supervision Part C / General Supervision

Indicator 12: Percent of hearing requests that went to resolution sessions that were resolved through resolution session settlement agreements (applicable if Part B due process procedures are adopted).

(20 U.S.C. 1416(a)(3)(B) and 1442)

Measurement: Percent = (3.1(a) divided by 3.1) times 100.

FFY	Measurable and Rigorous Target
2006-07	Missouri did not adopt Part B due process procedures for Part C.

Actual Target Data for 2006-07:

Not applicable as Missouri did not adopt Part B due process procedures for Part C.

Discussion of Improvement Activities Completed <u>and</u> Explanation of Progress or Slippage that occurred for 2006-07:

Not applicable

Revisions, <u>with Justification</u>, to Proposed Targets / Improvement Activities / Timelines / Resources for 2006-07:

Not applicable

Part C State Annual Performance Report (APR) for 2006-07

Monitoring Priority: Effective General Supervision Part C / General Supervision

Indicator 13: Percent of mediations held that resulted in mediation agreements.

(20 U.S.C. 1416(a)(3)(B) and 1442)

Measurement: Percent = [(2.1(a)(i) + 2.1(b)(i))] divided by 2.1] times 100.

FFY	Measurable and Rigorous Target
2006-07	Not set due to lack of baseline data

Actual Target Data for 2006-07:

There were no mediations requests during 2006-07.

Discussion of Improvement Activities Completed <u>and</u> Explanation of Progress or Slippage that occurred for 2006-07:

Not applicable

Revisions, <u>with Justification</u>, to Proposed Targets / Improvement Activities / Timelines / Resources for 2006-07:

No revisions have been made in the State Performance Plan.

Part C State Annual Performance Report (APR) for 2006-07

Monitoring Priority: Effective General Supervision Part C / General Supervision

Indicator 14: State reported data (618 and State Performance Plan and Annual Performance Report) are timely and accurate.

(20 U.S.C. 1416(a)(3)(B) and 1442)

Measurement: State reported data, including 618 data, State performance plan, and annual performance reports, are:

- a. Submitted on or before due dates (February 1 for child count, including race and ethnicity, settings and November 1 for exiting, personnel, dispute resolution); and
- b. Accurate (describe mechanisms for ensuring error free, consistent, valid and reliable data and evidence that these standards are met).

FFY	Measurable and Rigorous Target
2006-07	100% of State reported data will be timely and accurate

Actual Target Data for 2006-07:

The state met the 100% target for this indicator.

Missouri utilizes a variety of data sources to compile data for the Annual Performance Report and the Section 618 data. Sources include the following:

- webSPOE system webSPOE is a web-based system used to maintain child level data for the
 First Steps program. Child level Information includes referral, evaluation, meeting and IFSP data.
 These data are used for the Section 618 child count, primary setting and exit reporting.
 WebSPOE is also used for APR Indicators 1, 2, 5, 6, 7 and 8
- Monitoring data gathered through monitoring reviews are utilized for Indicators 8 and 9
- Dispute Resolution Database the database is used to record information on child complaints, due process hearing requests, mediations and resolution sessions. The database is used to monitor timelines throughout the year, and data are used for the Section 618 Dispute Resolution table and for APR Indicators 10-13
- Others See Indicators 3 and 4 for information about Early Childhood Outcomes and the First Steps Family Survey

Missouri utilized OSEP's scoring rubric to evaluate the accuracy and timeliness of data collected for 2006-07. The results are summarized below:

- APR
 - Valid and Reliable Data: 15/15 points
 - Correct Calculation: 15/15
 Followed Instructions: 15/15
 Timely Submission: 5/5
 Total: 50/50 points = 100%
- 618 State-Reported Data
 - Timely: 4/4 pointsComplete data: 4/4Passed edit checks: 4/4

Responded to Data Note Requests: 4/4

o Total: 16/16 points = 100%

• APR + 618 Total: 50 + (16x3) = 98/98 = 100%

Discussion of Improvement Activities Completed <u>and</u> Explanation of Progress or Slippage that occurred for 2006-07:

Missouri met the target of 100% for timely and accurate state reported data. All 618 data and required reports have been submitted on or before the due dates. OSEP data reports, as well as data submitted in the SPP/APR are accurate as evidenced by the verification efforts described below.

Improvement activities for the 2006-07 year included the following:

- Continue data review process to target technical assistance and improve accountability for data entered in the child data system
- Continue to review and improve data verification process

Discussion of these improvement activities follows:

Data review process: As discussed throughout this document, monthly, quarterly and annual review processes all involve a review of data. These reviews are used to identify issues at an early stage in order to address and correct them proactively. Data will be used to target areas that SPOEs must address in their quarterly reports to DESE.

Data verification process: Missouri implemented the new web-based child data system in the summer of 2005. This system captures virtually every data element in the Part C system and contains information from referral, eligibility determination and IFSP development. The system is compliance-driven; it requires critical data items and conducts edit checks on data to help ensure accuracy. The system supplies a large amount of data that can be reviewed at the SPOE and state levels for program evaluation and monitoring purposes. Much of the data for the SPP/APR comes from this system, and various data elements are monitored carefully and verified as necessary. One example is the verification of reasons for delays in meeting the 45 day timeline from referral to IFSP development.

Revisions, <u>with Justification</u>, to Proposed Targets / Improvement Activities / Timelines / Resources for 2006-07:

No revisions to targets or improvement activities have been made in the State Performance Plan.